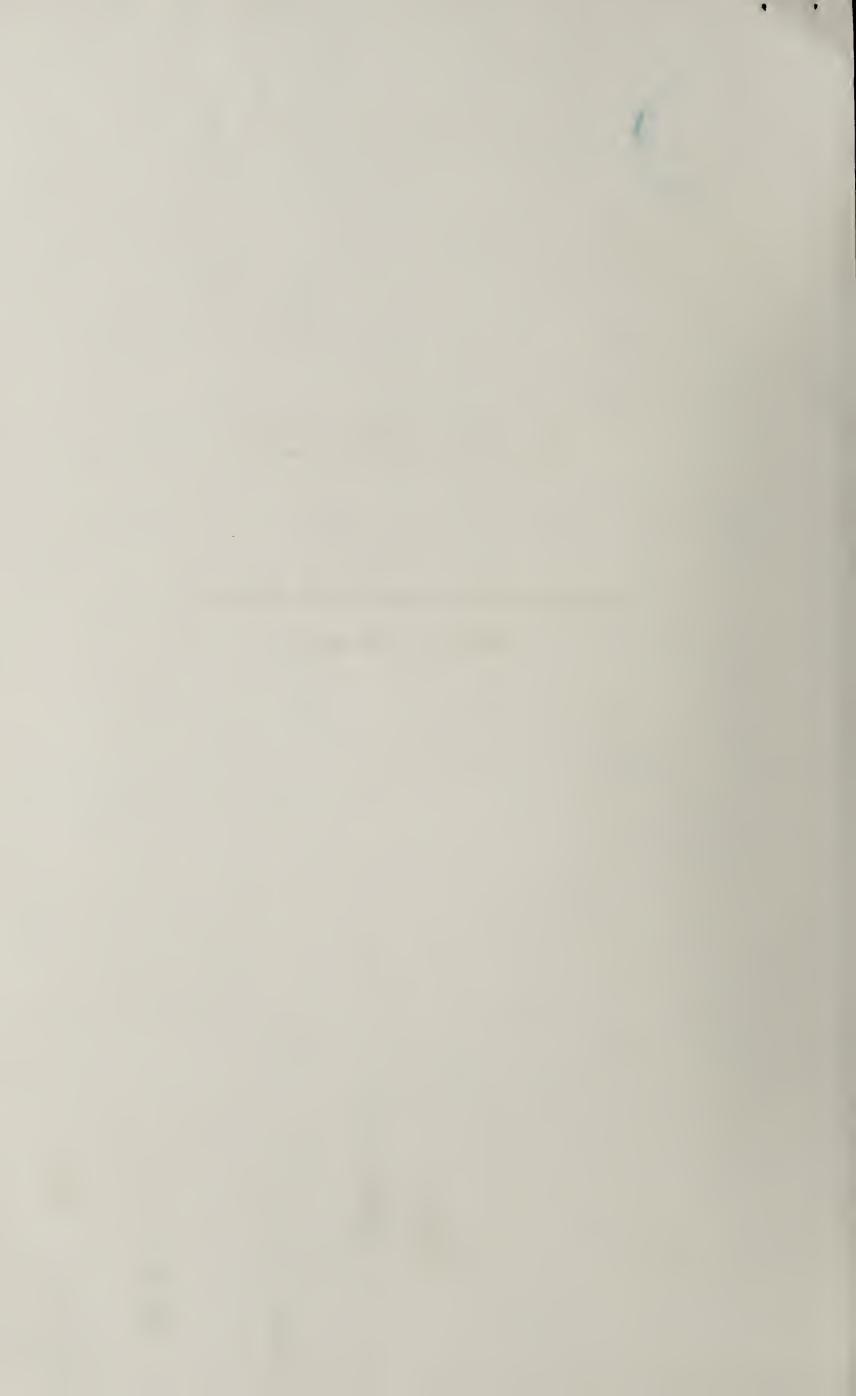
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LOOE URBAN DISTRICT COUNCIL \*

# THE ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1968

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### To the Chairman and Members of the Looe Urban District Council.

Mr. Chairman, Ladies & Gentlemen.

During the year ending on 30th June 1968 the estimated population of No. 7. Health Area increased by 420 to a total of 52,060. With the exception of Torpoint Urban District which showed a reduction of 210 all other five County Districts had increases in population of varying degrees.

The number of live births at 743 was slightly below the 1967 total of 757 but the corrected birth rate was slightly above the rate for that year and stood at 17.7 per 1000 of population. The highest corrected birth rate in an individual district was in the Torpoint Urban District where it was 261 and slightly higher than the comparable figure of 20.3 for the Borough of Sattash. The national live births rate was 16.9 per 1000 of population. During 1968 there was a sharp increase in infant deaths as compared with 1967, and this brought the infant mortality rate to 23.0 per 1000 live births, appreciably above the national rate of 18.0. As is usual in this situation the majority of these infant deaths took place in the critical days after being born. Of the 17 infants who died under the age of one year, no less than 10 failed to survive for more than seven days, a further 1 infant did not live beyond four weeks, and the remaining 6 died between then and their first birthday. No deaths resulting from abortion, or other complications of pregnancy, childbirth on the puerperium were registered during 1968.

During the year 706 deaths occurred, giving a corrected death rate of 11.6 per 1,000 of population slightly below the national rate of 11.9. As invariably happens, heart disease, as the captain of the men of death, was responsible for most deaths - 37% in all, whilst cancers of various types caused 18% of all deaths. For the third successive year lung cancer has shown up as causing the largest numbers of death attributed to the defined forms of cancer. During the year this form of cancer caused 31+ deaths, or just over one quarter of all deaths due to cancer. In this connection it is worth repeating that the cigarette remains the principal villain of the piece, and bothing in recent studies of the situation has done anything to show the cirgarette smoking habit in any more favourable light. Indeed as research and enquiry proceeds the harmful effects of cigarette smoking are being recognised in disabling and killing diseases other than lung cancer. Not surprisingly perhaps its effects in aggravating and perpetuating the "English disease" - chronic bronchitis - are proven beyond all reasonable doubt. It is also being recognised as having some part in the causation of ischaemic (coronary) heart disease and there are indications vague and unproven as yet, of an association with other forms of disease. It is therefore not very encouraging to have to report that in 1968 the number of deaths attributed to lung cancer rose to 34 in the Health Area and the death rate for this disease exceeded that of both the County of Cornwall and the country as a whole. Much of the rise was accounted for by a sharp increase in deaths of females from this cause.

The incidence of notifiable diseases was comparatively light during 1968. In all 189 cases were notified representing a rate of 3.63 per 1000 of population. As usually happens the most prevalent of these diseases was measles, of which 114 cases were notified. This may be the



last occasion on which measles will contribute the bulk of cases since the recent introduction of a prective vaccine against measles should largely stamp out this disease. None of the more serious forms of notifiable disease occured during the year.

During 1968 changes were made in the Regulations which require the notification of food poisoning, and infectious diseases. The principal effect of the Regulations is to make infective jaundice, tetanus, yellow fever and leptospirosis notifiable diseases, and to remove pneumonia, acute rheumatism, erysipelas and puerperal pyrexia from the list of diseases which must be notified. In addition the powers of County District Councils are extended to permit action in cases of food poisoning by which persons suffering from or carrying an infection which may cause food poisoning can be required to discontinue or refrain from any occupation connected with food.

The incidence of new cases of tuberculosis coming to light during the year fell from 15 in 1967 to 12 during 1968. Of these 12 cases 8 were respiratory infections, and 4 involved various other parts of the body. As is generally the case 8 of the 12 persons affected were in the age groups above 45 years of age. One death involving a male in the 55 to 44 year age group was registered during the year.

During 1968 thanks to assistance forthcoming from the Weights and Measures Department of the County Council a considerable amount of sampling of milk from producer-retailer herds was undertaken in the Health Area. By the end of the year milk from all 60 or so producer-retailers had been sampled on at least one occasion and was submitted to laboratory examination for the specific purpose of detecting any brucella abortus infection which might be present in the untreated milk concerned. In one of the herds involved close on half the cows were found to be excreting brucella abortus organisms in their milk, and in another smaller herd one cow was producing infected milk. In both cases the producer-retailers concerned agreed to divert all milk produced from their herds for heat treatment at a pasteurisation plant, and to refrain from offering for sale any untreated milk or milk products. Although the number of sources of infection discovered was small in relation to the total number of producer-retailers selling untreated milk, it is important that such sources be identified since brucellosis in the human being can become a chronic disabling illness productive of much suffering and misery.

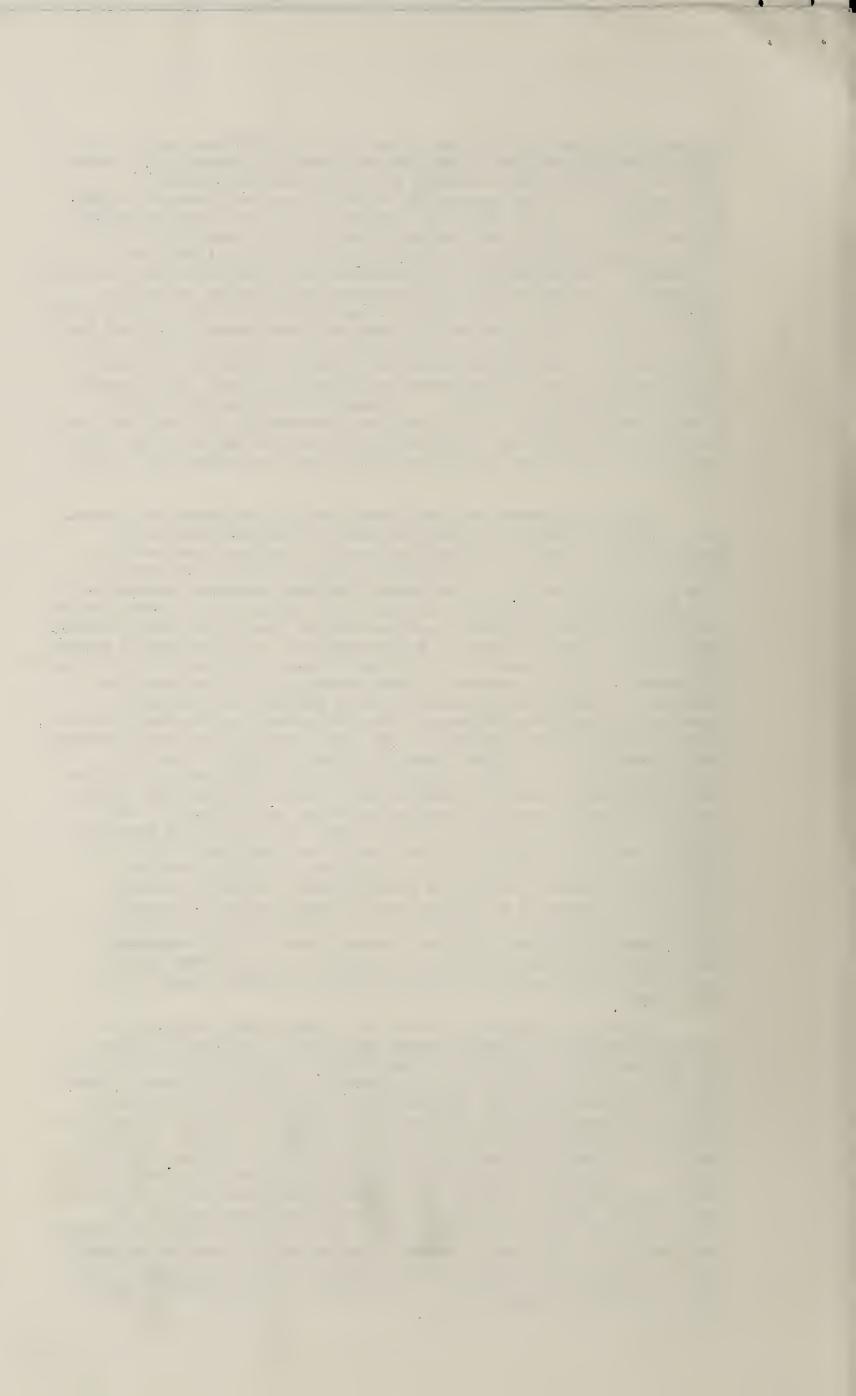
In previous years I have written of the growing problem which refuse of all sorts presents. Domestic refuse swelled by the paper, cardboard and plastic wrappers and containers in which goods are now sold is yearly becoming more bulky, and the same is true of trade refuse. With the provision of central heating in homes dispensing as this does with the need for firegrates, and kitchen stoves, the ability to dispose of combustible refuse in the home is severely restricted on non-existent. Because of the high cost of land dictating more densly developed housing estates, gardens are small, neighbours are close at hand on all sides, and in consequence the garden bonfire with its smoke and flying ash acquires an ante-social contact. Indeed because of the restricted size of most gardens the disposal of garden refuse, such as lawn mowings, weeds, and spent plants is itself adding to the whole refuse disposal problem since increasongly householders are turning to and expecting from their local Council some help in disposing of this type of refuse. Whatever the difficulties in collecting and transporting refuse to the disposal area, and they are real and increasing all the time, the main problem in this service is at the final site of disposal - the refuse tip. In this Health Area controlled tipping is carried out. This involves the frequent covering of layers of deposited refuse by inert covering material such as earth or rubble. Even where this covering material can be obtained on or close to the tipping site the provision of heavy equipment moving on caterpillar track is needed to help level out the tipped refuse, to compact it down, and to then move the covering material and spread it over the refuse. The cost of such

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mechanical equipment is high and since it is in continuous use a suitably skilled man must be employed to drive, and maintain it. Where covering material is not available at or near the tipping site considerable additional expense may arise through the necessity to haul it to the tip. I have previously referred to the real and increasing difficulty in finding sites physically suitable and acceptable from the point of view of amenity and public health for the final disposal The combination of remoteness from dwellings, with reasonable of refuse. accessibility by roads wide enough to carry bulky refuse collection vehicles, a low risk of polluting watercourses and streams, and the avoidance of land of good agricultural value, are requirements which are hard to meet even in a sparsely populated rural area. It may well be that before too long this consideration and others operating in the field of local government service may compel the adoption of more sophisticated methods of disposing of refuse. A community producing more refuse in which sites suitable for disposal are increasingly difficult to find must face the unpalatable probability that this service is going to cost a good deal more in the future than people have been accustomed to pay for it.

Traffic congestion on trunk roads leading into Devon and Cornwall gives eloquent testimony to the popularity of the south-west as a summer holiday resort, and leaves no room for doubting that catering for the tens of thousands of holiday visitors is a major industry in this part of the world. As the demand for these services is seasonal it is not possible to maintain a permanent staff of catering workers trained and skilled in the preparation and handling of food. The annual incursion each spring and early summer of large numbers of untrained casual workers into hotels, cafes, snack bars and other premises in which food is prepared and served is always a source of some concern. It is true that few outbreaks of food poisoning occur and this suggests that owners and managers of these establishments do much to achieve and maintain reasonably good standards of food hygiene. On the other hand one gets the impression that visitors suffer to some extent from minor attacks of gastroenteritis which do not come to notice officially since they do not find them sufficiently serious to seek medical advice. Whether such attacks are the outcome of some intemperance in eating and drinking to which people on holiday are prone, or whether they are infected by improperly handled food is difficult to decide, but I feel sure that in a proportion of cases the latter cause operates. This was certainly the case amongst visitors staying at a holiday camp in this area where following an unusually high prevalence of gastro-enteritis amongst visitors, investigations amongst the staff discovered four members who were carrying organisms which are a common cause of food poisoning. When notices requiring the persons concerned to desist from handling food were served the cases of gastro-enteritis amongst guests at the camp ceased.

Cooked meat and meat products have always been recognised as potential carriers of food poisoning infection particularly if they are inadequately stored before being served. In recent years the role of uncooked meat as a source of food poisoning infection has been increasingly recognised and it is important that food handlers, including of course the housewife should be aware of the danger of transferring food poisoning organisms from raw meat to their hands and thence to other articles of food which are consumed without further cooking. It should invariable rule that after handling raw meat the hands are thoroughly washed and cutlery, and crockery which has been in contact with the meat should be thoroughly washed before being used in the preparation and storage of other foods. For the same reason the practice not widespread, but known to exist, of eating small pieces of uncooked meat is fraught with danger to the consumer, and has been known to cause food poisoning and in the case of raw sausage meat infestation with a small worm which infests the pig.



In closing I should again like to express my thanks to the Members and Officers of the six District Councils I serve for the help and understanding they have given me in carrying out the duties of my appointment.

I have the honour to be

Ladies and Gentlemen

Your obedient Servant,

P.J.FOX

Medical Officer of Health.



LOOE URBAN DISTRICT COUNCIL \*

#### HEALTH & HIGHWAYS COMMITTEE

Councillor G.E.Ranson

Chairman

Councillor Mrs. M. E. S. Couch, J. P., C. C.

Vice-Chairman

#### HEALTH OFFICERS OF THE AUTHORITY

P.J.Fox, M.D., B.Ch., B.A.O., D.P.H. - Medical Officer of Health.

Health Area Office, West Street, Liskeard, Cornwall.

LISKEARD 3373

J.E. Harvey, M.A.P.H.I., - Public Health Inspector.

The Guildhall, Fore Street, EAST LOOE, Cornwall.

LOOE 2255/6

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Area of Urban District Population Number of Inhabited Houses Rateable Value Product of Penny Rate 1,650-acres 4,060 1,750 £199,414 £790

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#### VITAL STATISTICS OF 1968

	Male	Female	Total
Live Births	30	25	55
	Looe U.D.	Health Area N	o:7 England & Wales
Birth rate per 1,000 of population	18.8	17.7	16.9
Still Births	Non	e registered.	
	Male	Female	<u>Total</u>
Deaths	22	28	50
	Looe U.D.	Health Area N	o:7 England & Wales
Death Rate per 1,000 of population	7.5	11.6	11.9
	Male	Female	<u>Total</u>
Deaths of infants under the age of one year	_	1	1
	Looe U.D.	Health Area No	o:7 England & Wales
Infant mortality rate per 1,000 live births	18.0	23.0	18.0
Principal Cause	es of Death at	: All Ages	

Heart Disease	17
Stroke	9
Cancer (all sites)	8
Respiratory Disease	8

For the first time since 1963 there was an excess of births over deaths. Of the 55 live births 5 were illegitimate giving a rate of 9.1% of all births. Of those who died during the year 40% had reached or exceeded the age of 75 years at the time of death.

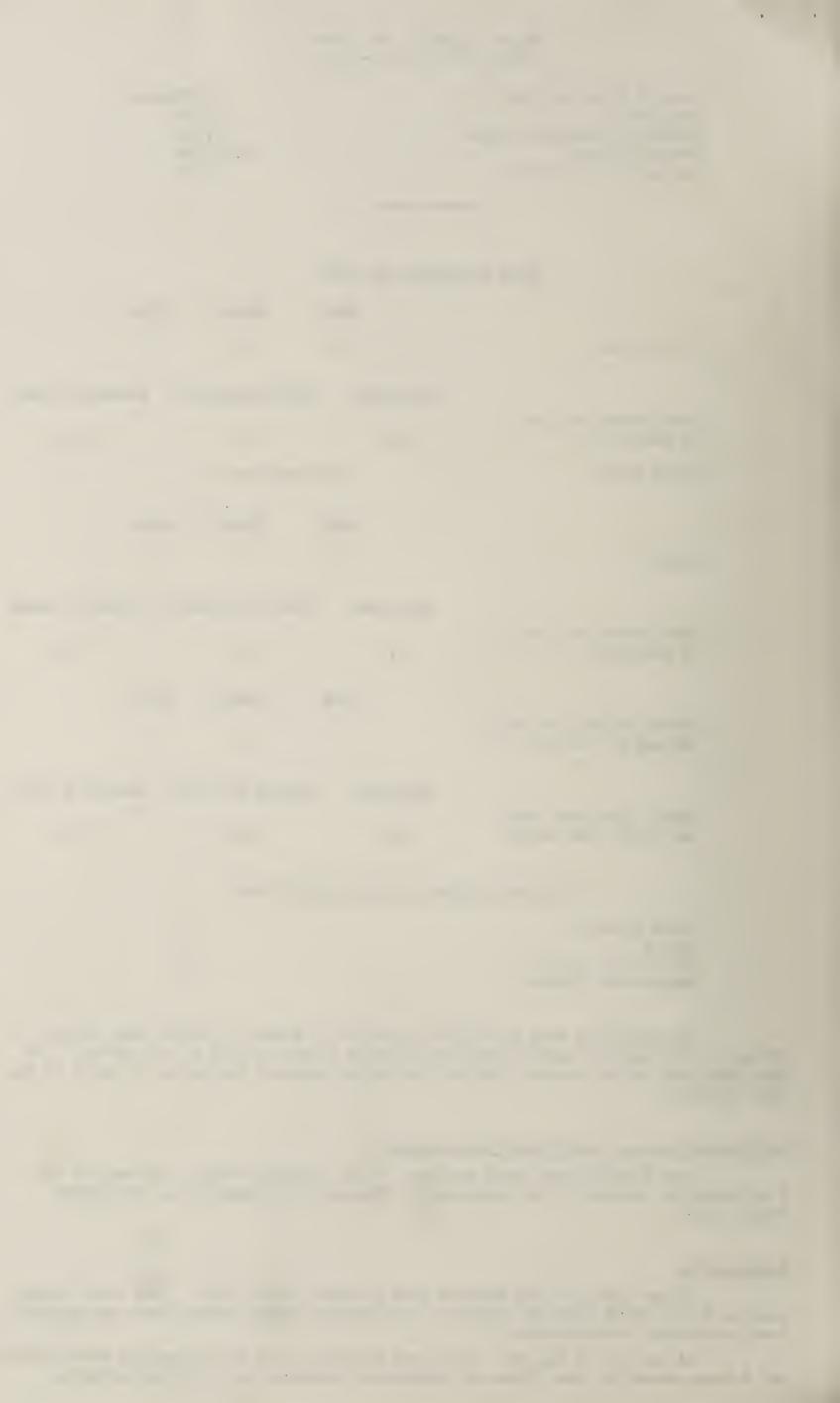
#### Notifiable Disease (other than Tuberculosis)

With 7 cases only being notified - 4 of whooping cough, 2 of measles and 1 of infective jaundice - the incidence of this group of diseases was very light during 1968.

#### Tuberculosis

No new cases of this disease were notified during 1968. The death of one male in the 55 to 65 year age group was attributed to other tuberculosis as distinct from respiratory tuberculosis.

At the end of the year there were 10 known cases of respiratory tuberculosis and 6 known cases of other forms of tuberculosis residing in the Urban District.



#### Water Supply

An adequate supply of wholesome water was available throughout the year from the mains of the East Cornwall Water Board.

#### Sewerage and Sewage Disposal

A comprehensive scheme for sewering the town and providing treatment of the sewage has been prepared and submitted to the Ministry of Housing & Local Government from whom the necessary approval is awaited.

#### Food

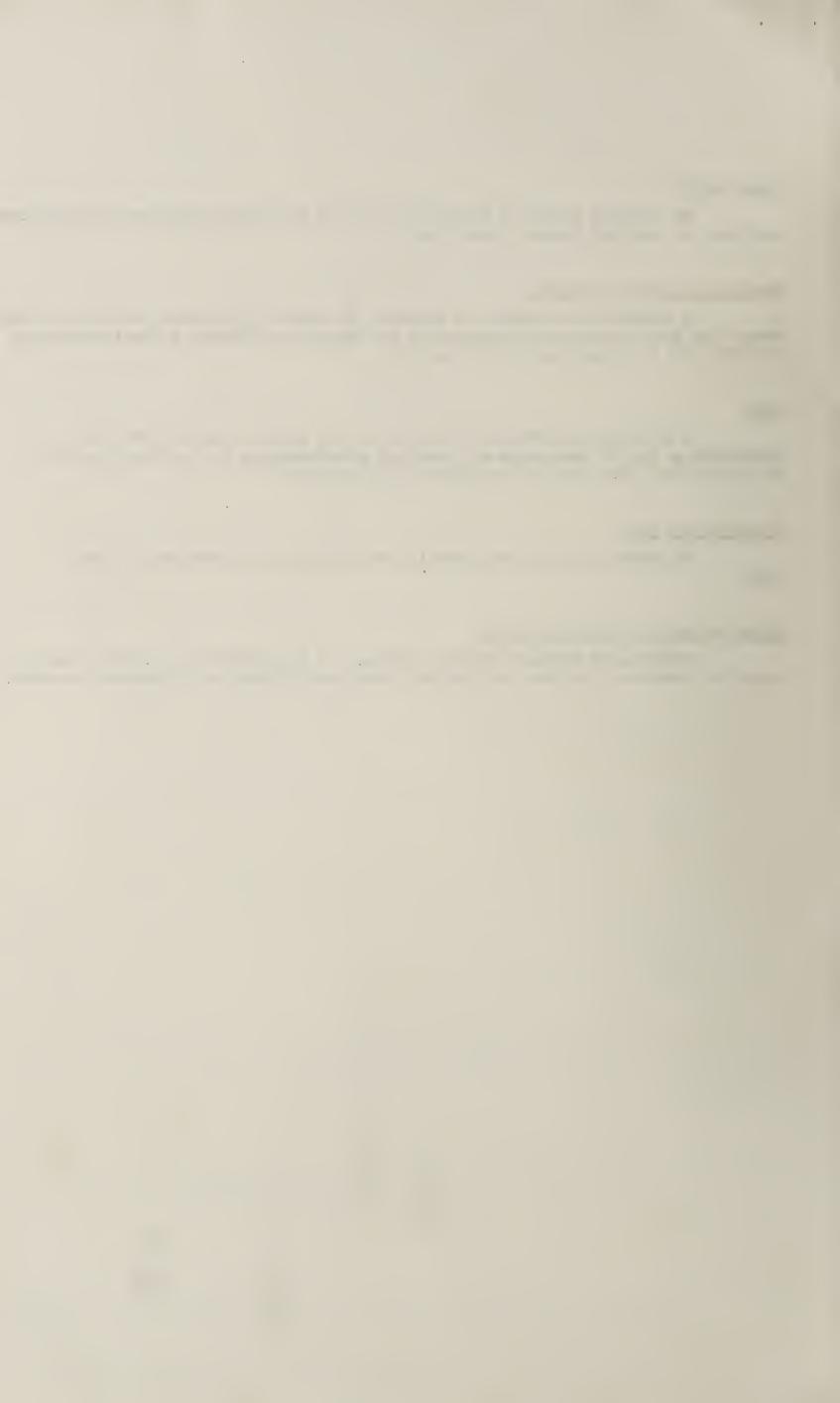
A generally satisfactory standard of food hygiene was achieved and maintained in the 86 food shops and catering establishments in the Urban District. No case of food poisoning was notified during the year.

#### Factories Act 1961

No difficulties in the operation of this Act were experienced during 1968.

#### Report of Public Health Inspector

This report by Mr.J.E.Harvey follows. I am grateful to Mr.Harvey and his Technical Assistant, Mr.Sims, for the help they have afforded me throughout the year.



### Report of Mr. J.E. HARVEY, Surveyor & Public Health Inspector.

#### HOUSING

The conversion of the old Coastguard Station into nine flats was completed. In addition, a house already owned by the Council was converted into two flats. Council accommodation at Coastguard Terrace now consists of eleven one-bedroom and one two-bedroom flats.

The Council did not undertake the building of any new houses. There are sixty-five families still on the Council Housing List.

The embargo on building remained but limited development took place, namely at East Cliff and Barbican.

The total number of houses built for private enterprise was 22.

#### SEWERAGE & SEWAGE DISPOSAL

The method of sewage disposal is by the discharge of crude sewage into the river from 26 outfalls and also discharging crude sewage from an outfall at Hannafore. The Plaidy area has no sewers, each property has its own septic tank, or similar, tank.

The Council finally decided on the type of treatment to be used in their proposed sewage disposal scheme. The Consulting Engineers prepared the scheme and Ministry approval is awaited.

Approximately 1-mile of new sewer was laid at the Barbican Estate.

#### WATER SUPPLY

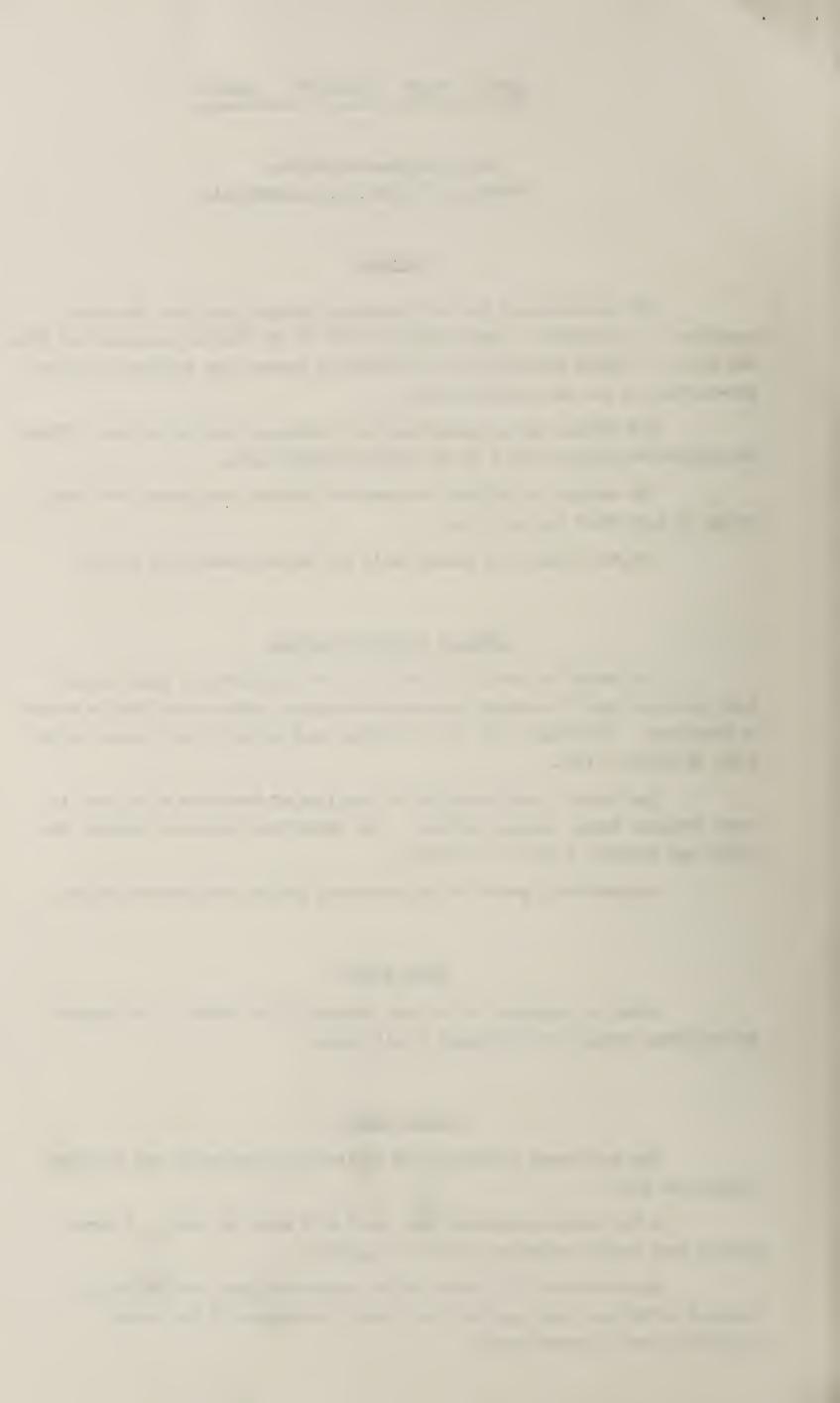
Water was supplied by the East Cornwall Water Board. An adequate and wholesome supply was maintained at all times.

#### PUBLIC HEALTH

The department dealt with 108 applications concerning the Building Regulations 1965.

1,040 general enquiries were dealt with over the year. 8 Formal Notices were served concerning statutory nuisances.

Inspections of 215 known holiday properties were carried out and informal action was taken against a very small percentage of the owners requesting certain improvements.



The number of complaints concerning this type of accommodation has dropped considerably since inspections were commenced; three complaints were received last season, two of which were justified. One of these was passed to the Weights & Measures Department for action under the Trade Descriptions Act. The offender was subsequently cautioned. No action could be taken on the other.

Work was commenced at Millendreath Holiday Village and it is hoped that approximately half the permitted 178 chalets will be completed by the 1969 season. These chalets are traditionally built and all will be connected to a sewage treatment plant.

The one camping site in the area was inspected regularly and was always found to be in a highly satisfactory condition.

#### RODENT & PEST CONTROL

Routine rodent control continues. A total of 221 inspections and treatments were carried out during the year. There was an increase in the number of isolated infestations throughout the town during the winter months; these were successfully contained and eliminated.

Two control programmes were carried out at the Council's incinerator and refuse disposal tip with good result.

A survey and test baiting carried out on the Hannafore sewer system showed no infestation.

3 minor infestations of cockroaches and 1 infestation of bed bugs were eliminated in business premises.

OFFICES. SHOPS & RAILWAY PREMISES ACT 1963	
Number of initial visits carried out during the year	8
Number of re-visits carried out during the year	59
Number of new premises registered during the year :-	
Offices 1 Retail Shops 3 Catering Establishments 1	5
Total number of registered premises :-	
Offices 22 Retail Shops 87 Wholesale Shops 13 Catering Establishments 55 Fuel Storage Depots 6	183
Persons employed in registered premises :-	
Offices 68 Retail Shops 318 Wholesale Shops 46 Catering Establishments 277 Fuel Storage Depots 34	<b>7</b> 43
Total Males	291
Total Females	452

A number of proprietors of registered premises were warned concerning inadequate heating arrangements.



#### REFUSE COLLECTION & DISPOSAL

Refuse was disposed of by means of partial incineration.

The volume of refuse continues to grow, especially during the holiday season. At times our resources were stretched to the limit to cope and it is to be suggested that a once-weekly collection only be used for the mainly residential areas during next season.

Meetings at Officer level with neighbouring authorities have been held with a view to having joint disposal points. This would be the answer to Looe's problem if a suitable site can be found within a reasonable distance of the area.

#### FOOD & DRUGS ACT 1955

The following foodstuffs were voluntarily surrendered for condemnation :-

Tinned Fruit and Vegetables

4-cwts 16-1bs

62-1bs

Tinned Fish

22-1bs

Fresh Fruit & Vegetables

18\frac{1}{2}-cwts

1-cwt 30\frac{1}{4}-1bs

56-1bs

Total ... 1-ton 5-cvts 161-lbs

The number of food shops and catering establishments in the Urban District total eighty-six.

289 inspections were carried out under the provisions of the Act and subsequent regulations.

22 premises were registered under Section 16 of the Act.

The general standard of hygiene maintained by food shops and catering establishments throughout the Urban District is very satisfactory.

One prosecution was taken under Section 2 of the Act, concerning mould growth in a bottle of milk. The defendants were found guilty and a substantial fine was imposed.

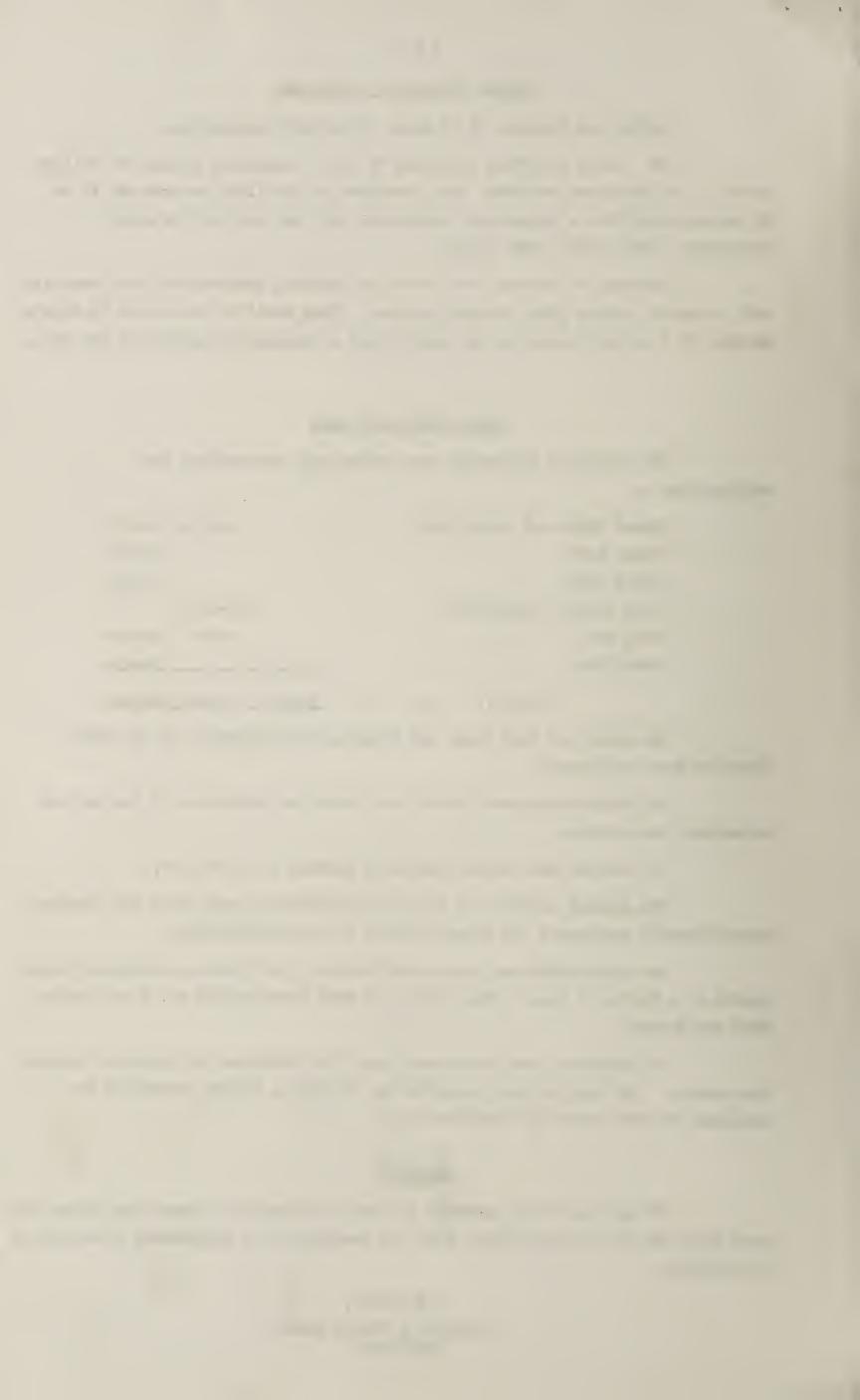
45 samples of ice cream were taken from retailers at intervals through the season. The samples were submitted to the Public Health Laboratory for analysis and were generally satisfactory.

#### GENERAL

It has been found possible to make more frequent inspections during the year since Mr. Sims was appointed, this has resulted in an improvement generally in the district.

J.E.HARVEY,

SURVEYOR & PUBLIC HEALTH INSPECTOR.



#### APPENDIX 1

#### PRINCIPAL CAUSES OF DEATH - ALL AGES - 1968

DISEASE	ST. GERMANS R.D.	LISKEARD R.D.	SALTASH M.B.	TORPOINT U.D.	LISKEARD M.B.	LOOE U.D	HEALITH AREA No.7
Heart disease Cancer ( all sites) Stroke Respiratory disease Circulatory disease Digestive disease Diabetes	63 47 35 19 13 4	78 29 26 17 4 6	39 23 14 11 1 4 2	16 10 6 8 5 1	48 11 25 14 1 2	17 8 9 8 1 2	261 128 115 77 25 19 13

#### APPENDIX 2.

#### TYPES OF HEART DISEASE AND CANCER CAUSING DEATH - 1968

TYPE OF DISEASE	ST. GERMANS R.D.	LISKEARD R.D.	SALTASH M.B.	TORPOINT U.D.	LISKEARD M.B.	LOOE U.D.	HEALTH AREA No.7
Ischaemic heart disèase Hypertensive disease Other heart disease	43 5 15	64 1 13	29 1 9	13 - 3	43 1 4	<b>15</b> - 2	207 8 46
Cancer of lung and bronchus Cancer of breast Cancer of stomach Cancer of uterus Other Cancers	11. 7 4 1 24	6 - 2 - 1 20	9 1 2 - 11	3 4 - 3	1 - - 1 9	4 2 - 2	34 14 8 3 69

#### APPENDIX 3

#### DEATHS BY AGE GROUPS - 1968

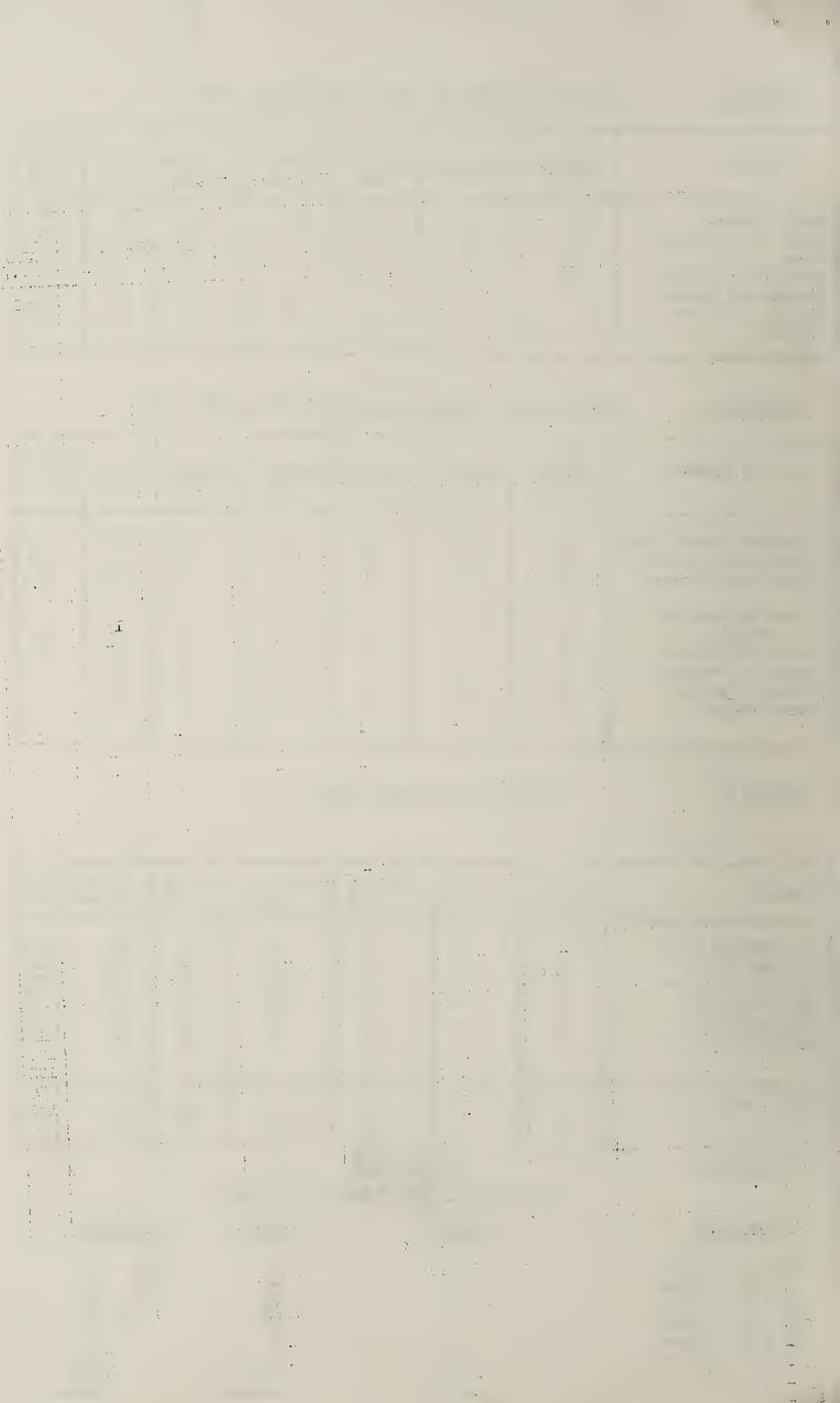
DISTRICT	0 - 4 YEARS	5 - 14 YEARS	15 <b>-</b> 44 YEARS	45 - 64 YEARS	65 <b>-7</b> 4 YEARS	75 years and over	ALL AGES
ST. GERMANS R.D. LISKEARD R.D. SALTASH M.B. TORPOINT U.D. LISKEARD M.B. LOOE U.D.	3 8 5 2 1	1 1 - -	4 2 2 2 1 1 1	37 23 25 16 16 7	57 55 27 18 29 21	111 91 43 16 60 20	21.3 180 102 54 107 50
HEALTH AREA NO. 7.	20	2	12	124	207	341 \	706

#### APPENDIX 4.

#### TUBERCULOSIS

#### NEW CASES IN HEALTH AREA NO.7. - 1968

AGE GROUP	MALES	FEMALES	PERSONS
0 - 4 years	200		-
5 - 14 years	1		1
15 - 24 years	-	2	2
25 - 44 years	<b></b>	1	1
<b>45 -</b> 64 years	3	1	4
65 years and over	3	1	4
	7	5	12
			-



	MALES	FEMALES	PERSONS
New case r	•		
<b>-,000</b> 01 E	0.134	0.096	0.230

### CASE RATES AND MORTALITY RATES IN COUNTY DISTRICTS IN HEALTH ARE NO. 7

DISTRICT	NEW CASES	ALL KNOWN CASES	DEATHS
St. Germans R.D.	0.40	1.74	-
Liskeard R.D.	0.15	1.61	••
Saltash M.B.	0.35	1.99	-
Torpoint U.D.	0.17	3.47	•••
Liskeard M.B.		5.37	
Looe U.D.	-	3.94	0.25
Health Area No.7	0.23	2.46	0.02
Cornwall County	0.25	2.67	0.05

### APPENDIX 5 CANCER OF THE LUNG AND BRONCHUS DEATHS BY AGE GROUPS - 1968

AGE GROUP	MALES	FEMALES	PERSONS
45 - 54 YEARS	l	1	2
55 - 64 YEARS	9	3	12
65 - 74 YEARS	<b>1</b> / <sub>+</sub>	3	17
75 YEARS AND OVER	1	2	3
	ectoromiquecopouries.	Mark Translation Company	
	25	9	34

#### DEATH RATE PER 1,000 OF POPULATIONS - 1968

	MALES	FEM ALES	PERSONS
HEALTH AREA NO.7.	0.480	0.173	0.653
CORNWALL COUNTY	0.467	0.128	0.595
ENGLAND AND WALES	0.492	0.101	0.593

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## ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH IN RESPECT OF THE YEAR 1968 FOR THE LOOE URBAN DISTRICT IN THE COUNTY OF CORNWALL

### Prescribed Particulars of the Administration of the Factories Act. 1961.

1 - INSPECTIONS for purposes of provisions as to health (including inspections made by the Public Health Inspectors).

	Number		Number of	
Premises	On Register	Inspec-	Written Notices	Occupiers Prosecuted
(1)	(2)	(3)	(4)	(5)
<ul> <li>(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities</li> <li>(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority</li> <li>(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)</li> </ul>	19	28	2	
Total	19	28	2	-

2 - Cases in which DEFECTS were found (If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases").

Particulars	Nun	Number of Cases in which Prosecutions			
	Found	Remedied	Refe to H.M. Inspec- tor		were insti- tuted.
(1)	(2)	(3)	(4)	(5)	(6)
Want of cleanliness (S.1)	2	2	_	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	_	-	-	-	



Particulars	Number	of cases i were fou	Number of cases in which Prosecutions		
	Found	Remedied	Refe to H.M. Inspec- tor	rred by H.M. Inspec- tor	were instituted.
(1)	(2)	(3)	(4)	(5)	(6)
Ineffective drainage of floors (S.6)	-	-	-	-	_
Sanitary Conveniences (S.7) (a) Insufficient	-	-	-		-
(b) Unsuitable or defective	-	-	-		
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to Out work)	-	-	-	-	-
Total	_	_	-	-	

#### PART VIII OF THE ACT

#### Outwork

(Sections 133 and 134)

No Outworkers under these Sections of the Act are employed in the Urban District of Looe.

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